Name in Full

Certificate of Death

Bill Banning

Died at Town: Forts Store County: Q.a MARYLAND

Date 189 9 Month: Dec Day: 30 | Age Y. 85 M. — D. — | Native of Q.a.Co | Occupation nothing

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living One

Husband / Wife of —

Father's Name Not Known

Mother's Name Sarah Banning

Cause of Death: Primary old age 141

Immediate Heart failure

How long sick not at all

~~Accident, Suicide, Homicide~~

Reported by Chas. J. Davidson

Address Queenstown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Hester Bonds

Certificate of Death

Died at: Mar Cuckerville (Town) Z. A. (County)

MARYLAND

Date 1899 Month 12 Day 29 | Age Y. 12 M. 7 D. 19 | Native of Md | Occupation none

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of —

Father's Name: Sandy Bonds

Mother's Name: Margaret Bonds

Cause of Death: Primary Pneumonia 72 | How long sick 2 wks

Immediate | Accident, Suicide, Homicide

Reported by: J. McKraw MD

Address: Cuckerville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Louis W. Evans

Died at Templeville (Town) Queen Anne (County) MARYLAND

Date 189 9 / 12 / 1 — Age Y. 83 M. 10 D. 4 — Native of Pa — Occupation Physician

Male — ~~Female~~ — White — ~~Colored~~ — Married — ~~Single~~ — ~~Widow~~ Widower — ~~Divorced~~

Number of children living 8

Husband of Lucinda Evans

~~Wife~~

Father's Name X

Mother's Name X 97

Cause of Death — Primary: Bright's disease — How long sick 6 yrs

Immediate: Exhaustion

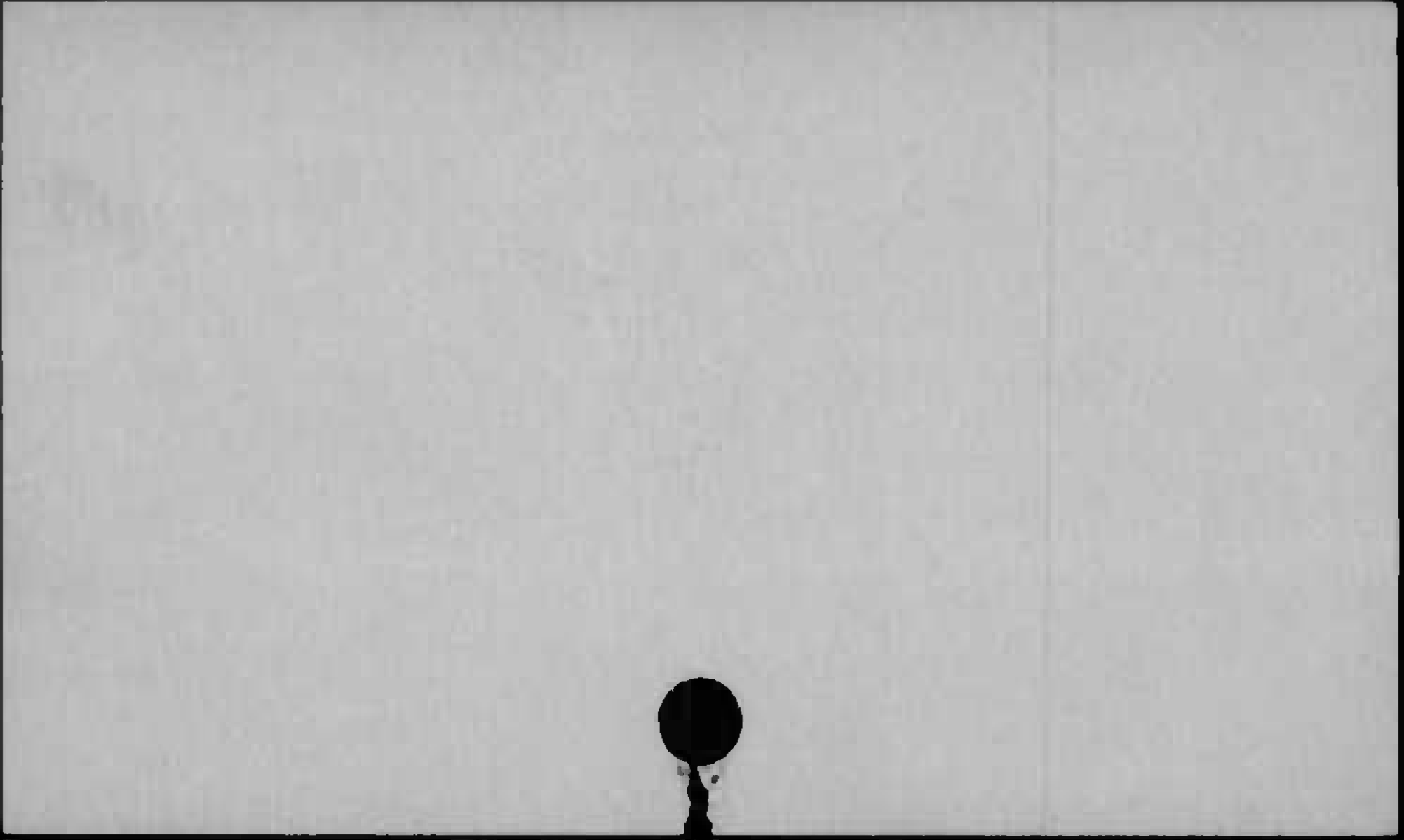
~~Accident~~, Suicide, ~~Homicide~~

Reported by J. E. Ogley

Address Templeville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON



Name in Full Not named Forman

Certificate of Death

Died at Town Centreville County Queen Annes Co MARYLAND

Date 1899 Month Dec Day 28 Age Y. – M. – D. 7 Native of Md Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living

Husband of Wife — 140 ~~[illegible]~~

Father's Name Pere B Forman Mother's Name Sadie B Forman

Cause of Death Primary Inanition How long sick

Immediate Pneumonia ~~Accident, Suicide, Homicide~~

Reported by W D Troy MD

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Edna Green

Certificate of Death

Died at Town: Centreville County: Queen Anne MARYLAND

Date 1899 Month: 12 Day: 16 Age Y.: 18 M.: 10 D.: 1 Native of: Md Occupation: Pupil

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife: —

Father's Name: Jessie Green

Mother's Name: Nora Richardson

Cause of Death: Primary: Acute Tuberculosis

Immediate: Exhaustion

How long sick: 2 month

Accident, Suicide, Homicide

Reported by: J. Morrison M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 85968

Name in Full Wm O. Hinson

Certificate of Death

Died at Town Near Church Hill County Queen Anne MARYLAND

Date 1899. Month 12 Day 9 | Age Y. 9 M. 5 D. 5 | Native of Md. | Occupation —

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ Number of children living —

Husband of Wife —

Father's Name Wm E Hinson

Mother's Name Emma J. Hinson

Cause of Death: Primary / Immediate Pneumonia 72

How long sick 1 week

Accident, Suicide, Homicide

Reported by J K Brown

Address Church Hill

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Robert H. Lane. Certificate of Death

Died at Town Kent Island County Queen Anne MARYLAND

Date 1899 Month 12 Day 3 | Age Y. 35 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name James Lane Mother's Maiden Name Emily Sorden Lane

Cause of Death { Primary | Immediate Consumption 22a | How long sick | Accident, Suicide, Homicide

Reported by Denton Journal

Address 2-3-1900

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79808

Name In Full

Certificate of Death

Wm. T. Slagle

Town

County

Died at Queen Anne MARYLAND

	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899	12	23	Age 60				

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 3

Husband of

Wife

Father's Name

Mother's Name 100

Cause of Death — Primary: Kidney-trouble — How long sick

Cause of Death — Immediate: — Accident, Suicide, Homicide

Reported by Transcript 12-28

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full George Spry

Certificate of Death

Died at Town Near Church Hill County Queen Anne MARYLAND

Date 1899 Month 12 Day 8 | Age Y. 40 M. 1 D. 13 | Native of Md. Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 4

~~Husband~~ Wife of Clara Spry

Father's Name Samuel Spry

Mother's Name Hermitia Spry

Cause of Death: Primary Valvula disease of Heart — How long sick 6 mos

Immediate 57

Accident, Suicide, Homicide

Reported by J K Brown

Address Undertaker Church Hill Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full: Clara Wilson

Certificate of Death

Died at: Town: Centreville County: Queen Anne's MARYLAND

Date 189 4 Month 12 Day 5 | Age Y. 6 M. – D. 16 | Native of Md | Occupation none

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of —

161

Father's Name: Geo Wilson

Mother's Name: Mary L. Wilson

Cause of Death: Primary: Only saw the child once about 5 day before its death but think death was due to meningitis

How long sick: 1 week

Immediate

Accident, Suicide, Homicide

Reported by: J M Corkran

Address: Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968